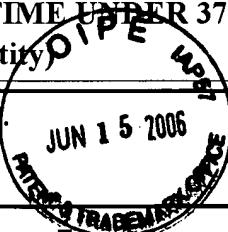


PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)
(Large Entity)

Docket No.
ENDOV-67987

In Re Application Of: Steven G. Baker, et al.



Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
10/796,543	3/8/2004	Kevin Thao Truong	24201	3731	1972

INVENTION: ENDOVASCULAR GRAFT FOR PROVIDING A SEAL WITH VASCULATURE

COMMISSIONER FOR PATENTS:

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response to the Office Action of 5/10/06 in the above-identified application.
Date

The requested extension is as follows (check time period desired):

<input checked="" type="checkbox"/> One month	<input type="checkbox"/> Two months	<input type="checkbox"/> Three months	<input type="checkbox"/> Four months	<input type="checkbox"/> Five months
from: <u>6/10/2006</u>			until: <u>7/10/2006</u>	
	<i>Date</i>			<i>Date</i>

The fee for the extension of time is \$120 and is to be paid as follows:

- A check in the amount of the fee is enclosed.
- The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 06-2425
- If an additional extension of time is required, please consider this a petition therefor and charge any additional fees which may be required to Deposit Account No. 06-2425
- Payment by credit card. Form PTO-2038 is attached.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

Dated: June 13, 2006

John V. Hanley
WILWIDER PATTON LLP

06/15/2006 AKEL FCH1 00000033 10796543

01 EC:1251 120.00 OP

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on

June 13, 2006
(Date)

Signature of Person Mailing Correspondence

John V. Hanley

Typed or Printed Name of Person Mailing Correspondence

Doc Code:

PTO/SB/17 (01-06)

Approved for use through 07/31/2006. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.



Fees pursuant to the Consolidated Appropriations Act, 2005 (T.R. 4818).

FEET TRANSMITTAL for FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)
\$120.00

Complete if Known

Application Number	TBD
Filing Date	March 8, 2004
First Named Inventor	Steven G. Baker
Examiner Name	Robert H. Muromoto, Jr.
Art Unit	3765
Attorney Docket No.	ENDOV-67987

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 06-2425 Deposit Account Name: Fulwider Patton LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or any underpayments of Credit any overpayments
 fee(s) under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x	\$18.00	= \$0.00		

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =	x	\$86.00	= \$0.00

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	0	/ 50 0 (round up to a whole number) x \$250.00 = \$0.00		

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Petition for a One Month Extension of Time

\$120.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	38,171	Telephone	310-824-5555
Name (Print/Type)	John V. Hanley			Date	6/13/2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.